

Iowa Department of Public Health

Iowa Healthy Communities: Harkin Wellness Grants

Annual Progress Report



30 November 2010

2009-10 Harkin Wellness Grant Report

Executive Summary

Greater than 64% of Iowa adults are overweight or obese. As a result, obesity-related health spending is projected to be over \$3.088 million by 2014. Tobacco use is the number one preventable cause of death and disease in the United States. In Iowa, approximately 66,000 kids now under 18 will ultimately die prematurely from smoking. Annual health care costs in Iowa directly caused by smoking total over \$1 billion. The Centers for Disease Control & Prevention Director, Dr. Thomas Frieden, describes these epidemics as winnable battles. Increased incidence of chronic disease and decreased access to oral and mental health services further burden the health care system. Iowans have a long history of overcoming challenges and have done so with the help of our greatest resource...our people. Our Iowa Healthy Communities: Harkin Wellness Grant Program maximizes our social capital by bringing together groups of people, in collaboration with local boards of health and the Iowa Department of Public Health, to rally around issues impacting the health of our residents.

Iowa is known for our “Field of Dreams” and the famous saying, “if you build it, they will come.” Our 2009-10 Iowa Healthy Communities: Harkin Wellness Grant Projects, in partnership with the Iowa Department of Public Health, did just that.

- We built strong local coalitions, the cornerstones of the local initiatives.
- We built opportunities for physical activity in rural areas. Shelby County was successful at “Dreaming Big” by completing a state of the art fitness center. Within weeks of opening, the parking lots were overflowing as an overwhelming number of fitness goers began using the new facility. As a result, an additional parking lot was constructed.
- We built systems that support individuals’ ability to make healthy food choices. Dubuque County provided healthy cooking classes to community residents and now have integrated the program into the business community.
- We built services locally for mental health. Black Hawk County expanded existing school-based mental health services and behavioral referrals decreased by over 12% in partner schools.
- We built-on community engagement to change the environment. Decatur County Board of Health had 50 volunteers contribute 933 hours toward completion of a trail project. High school students, college students, working adults and retirees completed the now widely-used trail.
- We built state-wide infrastructure to increase capacity of local coalitions by using a community coaching model and providing enhanced technical assistance

Initiatives originating and growing through local collaborative efforts and having strong community support are more likely to be sustained. Successful components of the Harkin Community Wellness Grant programs are being embedded into the local health system. By maximizing on our greatest resource, there is a spiralling-up effect that will create an even bigger impact in the future. In Adams, Cass, and Clayton Counties, groups of individuals attending chronic disease management, nutrition or physical activity classes or team incentive programs during the grant period are continuing to meet on their own for physical activity and social support. These communities have not only been successful in building a system where people will come, but more importantly, where they will stay and continue with their healthy lifestyle behaviors.

I. Iowa Community Wellness Grant Model

The Iowa Healthy Communities: Harkin Wellness Grant Program promotes a collaborative community approach to planning and implementing local initiatives that lead to healthier lifestyles and increased wellness. Also known as the Community Wellness Grant (CWG) program, projects contribute directly and measurably to increased disease prevention, improved wellness, enhanced fitness and better nutrition. The competitive grant program offers six focus areas related to health improvement for communities. Communities may select from one or more of the following broad, categorical areas: improved nutrition, increased physical activity, promotion of mental health well-being, reduction and prevention of tobacco use, promotion of oral health care, and prevention and management of chronic disease.

The Iowa CWG program has developed into its own model consisting of the following six components.

A. Local Boards of Health

The Iowa Department of Public Health (IDPH) partners with Iowa's local boards of health (LBOH) in the administration of the Community Wellness Grant program. The LBOH are responsible for carrying out the three core functions of public health: assessing community needs, collaborating with partners, and assuring public health services are available to their residents. The functions of the LBOH align with the priorities of the Iowa CWG program.

All local boards of health in Iowa conduct a Community Health Needs Assessment and Health Improvement Plan every five years. The participatory process engages all sectors of the community, prioritizes the most pressing community health needs, and uses data-driven decisions to develop the community health improvement plan. Community Wellness Grant (CWG) applicants base their proposed projects on their identified needs and implementation plan.

B. Technical Assistance Plan

1. Individual Project Technical Assistance

IDPH Health Promotion staff members provide individual project technical assistance to CWG projects. A telephone conference is scheduled on a monthly basis. The assigned IDPH Community Health Consultant completes an electronic survey at the end of each technical assistance call. The reports are filed in the project file. Telephone calls, email communication and visits to communities also occur. A minimum of one site visit is completed. An example of individual project assistance provided to communities is the facilitation of a nutrition and physical activity asset mapping process for the Jefferson County local coalition.

The following quotes about assigned community health consultants were written in the CWG final reports:

- "...She was there for whatever crazy questions we had, kept us on track and really cared about our project and the people involved...."
- "The support of IDPH staff has been huge, and it is deeply appreciated."

2. Group Technical Assistance

A structured group technical assistance schedule is built around the IDPH CWG model and includes training on coalition building and development, program evaluation, and sustainability planning. Developing coalition leadership, creating a detailed work plan, defining roles and responsibilities of coalition members, and building internal and external partnerships are highlighted during technical assistance meetings and impact community capacity.

The face-to-face meeting structure allows for a short learning time followed by work time. The learn-do cycle is repeated throughout the day. Project representatives sit at round tables with the IDPH community health consultant. The 2009-10 Community Wellness Grantees received the following group technical assistance:

- Telephone conference: Contract, invoicing, required reports, IDPH staff introductions.
- Coalition-building telephone conference
- Evaluation planning telephone conference
- Writing Community Success Stories telephone conference
- Sustainability I face-to-face full day training: Capacity-building, writing a sustainability plan, Community Capitals Framework.
- Sustainability II face-to-face full day training: Project planning, Policy, Community Capitals Framework

A survey of the 2009-10 CWG projects was conducted to assess their perceptions of the technical assistance received. Sixty-nine percent of respondents reported they strongly agreed or agreed with the statement, “The group TA conference calls to provide assistance with our Community Wellness project were helpful.” Ninety-two percent strongly agreed or agreed with the statement, “The group TA face-to-face meetings to provide assistance with our Community Wellness project were helpful.” The majority of responses for preferred venue of technical assistance was face-to-face and webinar. When asked what topics the projects would have benefitted from more of, evaluation, writing the project work plan, and maintaining the project timeline were the most frequent responses. As a result of the feedback from the 2009-10 grantee feedback, the two most recent grant cycles, 2010-11 and 2011, had project work plan and evaluation trainings conducted in the fall of 2010, earlier in their project period. Positive comments have been received from all of the face-to-face to trainings, especially the most recent evaluation and project work plan group technical assistance meetings.

The following comment was received from a CWG project on the technical assistance received.

“...The resources and information that we gained access to was incredible. The meetings we had were informative and it was nice to get together twice with everyone just to be able to ask questions, see their projects through their eyes and be able to offer assistance if needed.”

C. Local Coalition Building

The local board of health completes the work of the grant through a community coalition. IDPH technical assistance on coalition development encourages a coalition that is representative of the composition of the community. IDPH Health Promotion team members assist coalitions by providing meeting facilitation, strategic planning, and celebrating their

success. Community engagement and innovative ideas are important components of the CWG project's success and sustainability and are enhanced by an active coalition.

The 2009-10 CWG projects received a group technical assistance telephone conference on coalition building by the IDPH Office for Healthy Communities Coordinator, Jane Schadle. Rob Semelroth, IDPH Tobacco Prevention, Use & Control Division, also provided information on the implementation and operation of local community tobacco coalitions. For the grant cycles following the 2009-10 project, a partnership has developed with the University of Iowa Prevention Research Center to provide the CDC training, Community Organizing in Rural Environments.

Strategy 24 of the Centers for Disease Control and Prevention's "Recommended Community Strategies and Measurements to Prevent Obesity in the United States: Implementation and Measurement Guide" (2009) states "Local governments participate in community coalitions or partnerships to address obesity." The CWG projects focusing on nutrition, physical activity and chronic disease have already met strategy 24 through the work of their coalition and local board of health.

Examples of Community Wellness Grant Coalitions are listed below.

The Healthy Mills County Coalition was expanded to 30 individuals with a minimum of 15 members actively participating. New stakeholders have been added including representatives from the senior population, teens representing the tobacco coalition, the ministerial association, City of Glenwood, pharmacy and physicians. Steps are being taken to further expand the coalition. Formal meeting space has been defined. Members of the Healthy Mills County Coalition have committed to meetings every other month over the next year.

The Jefferson County Wellness Action Coalition (JeffCoWAC) was formed. Over 34 individuals representing businesses, organizations, governments and educational institutions have been meeting. A steering committee of 6 members meets regularly. Funds were leveraged to hire University of Northern Iowa's Institute for Decision Making, Business & Community Services to facilitate a strategic planning process in the spring of 2010. The strategic plan will be released in November, 2010.

D. Project sustainability

A definition for sustainability that best fit the goal of the Iowa Healthy Communities: Harkin Wellness Grant program was researched and the following meaning was selected:

Continuing the results and health benefits through:

- Integrating effective strategies into other community initiatives, and
- Developing community capacity¹.

¹ Shediac-Rizkallah, M.C. and Bone, L.R. (1998). Planning for the sustainability of community-based health programs: conceptual frameworks and future directions for research, practice and policy. Health Educ. Res 13:87-108.

Projects are encouraged to analyze the most effective strategies in each of the current initiatives and then to identify existing systems the strategies may be integrated with for long-term sustainability.

To increase capacity for sustainability planning, group technical assistance was provided on coalition development, capacity building, asset mapping, the Community Capitals Framework (CCF) for project planning, and development of a written sustainability plan. After the technical assistance training on developing a written sustainability plan, the projects are asked to write an updated sustainability plan, with the assistance of the local coalition, and submit it with the subsequent quarterly report. Planning for the sustainability of the coalition may be one indicator that predicts sustainability². Implementing related policy initiatives is another avenue toward sustaining a project with little financial investment.

When surveyed, 92% of CWG project directors are somewhat likely or highly likely the CWG project-initiated programs will continue and be sustained beyond the funding period. A few of examples of how CWG projects are being sustained are listed below.

- In Harrison County, sustainability has been at the core of their efforts. A wellness center funded by a 1 cent local option sales tax was built at West Harrison High School and funds from the CWG contributed to the purchase of equipment. All of the membership funds are placed in a maintenance fund to sustain the equipment. In addition, the West Harrison Wellness Committee serves as the coalition for the project and addresses ways the school district as a whole can be an environment conducive to a healthy lifestyle.
- The Van Buren County *Healthy Villages* program established mini-fitness centers for those villages in the county that did not have a school building that could be used for indoor walking. Local physical activity options were needed in the rural area over the winter months. One village renovated a room in the local convenience store for their fitness center. An overwhelming number of residents began using the fitness equipment creating a demand that resulted in a shortage of equipment. One of the villages took it upon themselves to more than triple the equipment provided by the grant. In each of the villages that houses a fitness center, the city council has agreed to cover the cost of maintaining the centers. The cost for the insurance has been covered by the cities' insurance plans. In one village, the site and the city share the insurance coverage of the center. The space and utilities for the mini-fitness centers are provided in-kind.

The wellness advisory committee of Healthy Villages has undertaken multiple Projects in a series of grants and is formalizing its structure by developing mission, vision and an organizational structure. The community stakeholders have contributed financially to train their leadership in group facilitation methods to build their capacities locally. This group is developing its 6th wellness center, nearing their goal of 7 wellness centers so each of the 7 villages has its own center.

E. Evaluation

The Iowa Community Wellness Grant program evaluates effectiveness at both the local and the state level. Local projects submit both process and outcome measures of their initiatives. As a statewide grant program, coalition attributes of capacity are measured,

² Feinberg, ME, Bontempo, DE, Greenberg, MT. (2008). Predictors and level of sustainability of community prevention coalitions. *American Journal of Preventive Medicine* 34 (6):495-501.

growth in the Community Capitals Framework is assessed, and achievement of local and state objectives. See Sections II and III of this report for evaluation results for the 2009-10 CWG project period.

Technical assistance provided by IDPH on project evaluation includes learning to develop a logic model, identify the difference between process and outcome measures, and write measurable objectives.

The following comment was made on a CWG Final Report:

“We really enjoyed using the community capitals resource. We are going to integrate the information into our Community Health Assessment and Needs Improvement process that is coming up.”

F. Policy and Environmental Change

A policy and environmental initiative was not required for the 2009-10 Community Wellness Grantees. However, to enhance potential sustainability options, training was provided on policy and environmental change at the Sustainability II technical assistance training held in April, 2010. The training provided an overview of policy and environmental change and supporting resources such as the Centers for Disease Control and Prevention’s “Recommended Community Strategies and Measurements to Prevent Obesity in the United States: Implementation and Measurement Guide³.”

Following the training, two separate surveys were conducted. For the first survey, 15 of 24 projects reported agreement with the following statements:

- Based on the information presented at the April 28th meeting, my knowledge of policy change related to health and wellness increased.
- Based on the information presented at the April 28th meeting, my knowledge of environmental change related to health and wellness increased.

The second survey requested each project complete an environmental scan of their county for each of the policies listed in the “Recommended Community Strategies and Measurements to Prevent Obesity in the United States: Implementation and Measurement Guide (3).” Of the 22 counties responding to the survey, 43.9% indicated having a policy to increase availability of healthy foods; 66.7% indicated having a policy to restrict availability of less healthy foods; 23.8% indicated having a policy to support breastfeeding; and 47.6% indicated having a policy to increase opportunities for extracurricular physical activity. All respondents indicated their county had a coalition to address obesity. See Table I

³ Centers for Disease Control & Prevention. (2009). Recommended Community Strategies and Measurements to Prevent Obesity in the United States: Implementation and Measurement Guide.

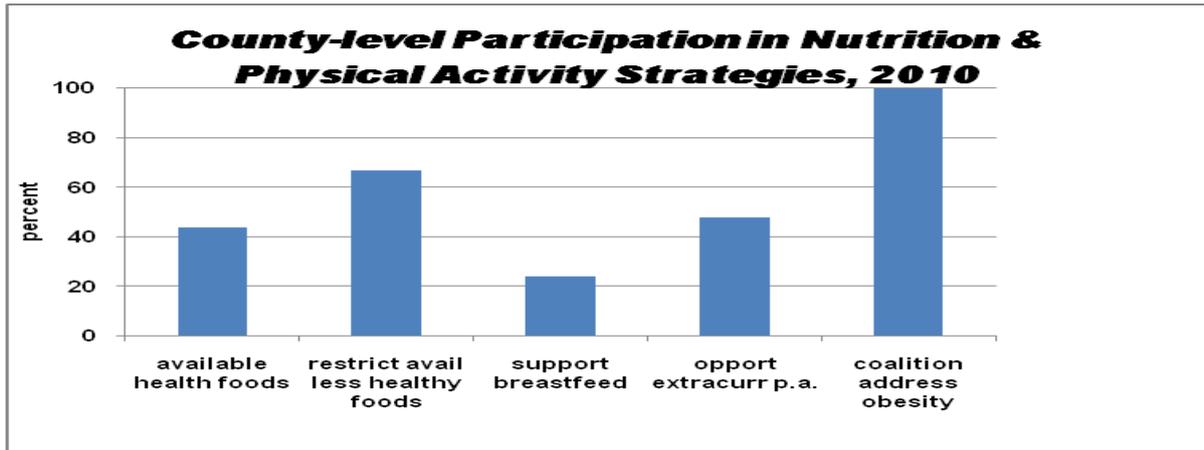
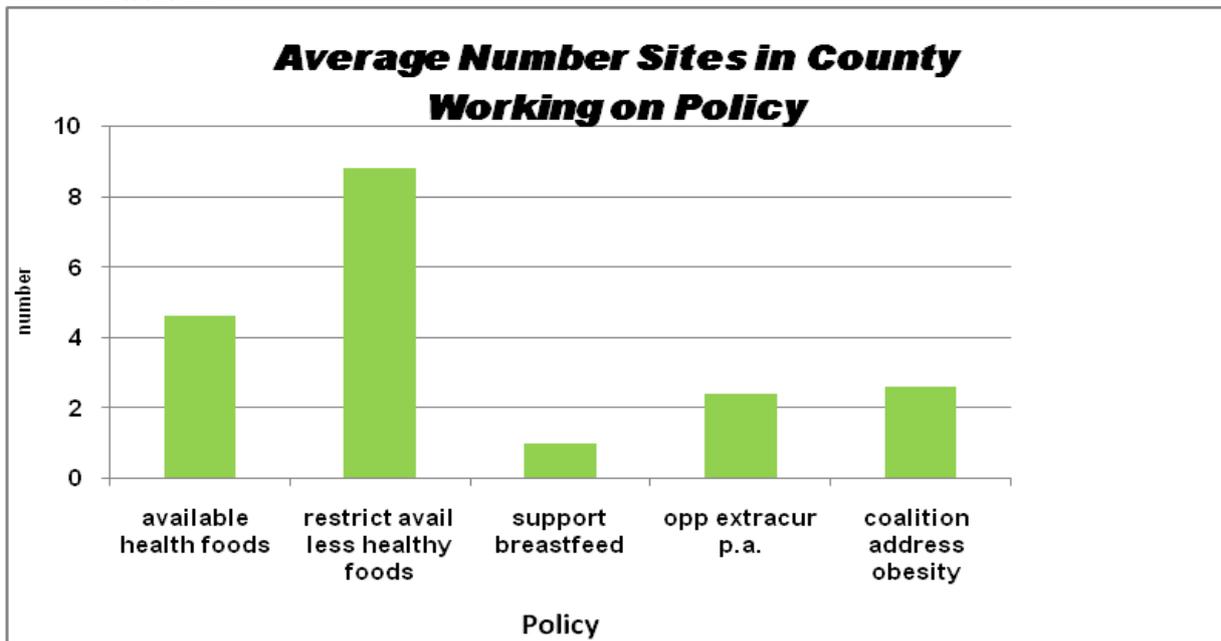


Table I

Those who responded “Yes” to the survey questions related to specific policies were further queried about the number of sites in the county working on a policy. An average of 4.6 sites were working on a policy to increase availability of healthy foods; 8.8 sites were working on a policy to restrict availability of less healthy foods; one site was working on a policy to support breastfeeding; 2.4 sites were working on a policy to increase opportunities for extracurricular physical activity; and 2.6 sites were working on a coalition to address obesity issues in the county. See Table II.

Table II



Examples of CWG policy initiatives include:

- Linn County: A policy was developed and adopted at a childhood center. The policy eliminates unhealthy snacks brought to school for special occasions, birthdays and holidays. Healthy alternatives were offered as ideas for parents. Parents sign the policy when they register their child.
- Harrison County changed the hours of operation for the wellness center twice at the request of the public to allow for increased access to the center.

II. Statewide Results

A. Coalition attributes

Three of the four “critical elements of collaborative capacity⁴” (2001) are being assessed for Community Wellness grantees. If the four critical elements are met, collaboration and sustainability are more likely to occur.

- Member Capacity
 - Nearly 90% of the CWG quarterly report respondents indicated the local coalition had agreed how to govern itself, make decisions and clarify roles of members.
 - 92% of project directors reported people are optimistic and feel that together they can make a difference.
- Relational Capacity
 - 100% of project directors report praise and recognition is given at meetings.
 - 100% of project directors report the coalition intentionally seeks partnership views.
 - 100% of project directors report the coalition makes an effort to get to know members.
 - 96% of project directors report people are made to feel welcome at meetings.
- Organizational Capacity
 - 100% report having a clear vision for their partnership.
 - 100% report asking members to assist with specific tasks.
 - 96% of project directors report the coalition is skillful in resolving conflict.
 - 92% of project directors report the coalition is a highly efficient work-oriented partnership.

The fourth element is programmatic capacity. Outcome measures of success for each program are listed in Section III of this report. Training on developing logic models and writing measurable objectives increased programmatic capacity of the CWG projects.

B. Growth in Community Capitals

“To understand how communities function, Flora and Flora (2004) developed the Community Capitals framework. Based on their analysis of entrepreneurial communities, they determined that the communities that were successful in supporting healthy and sustainable community and economic development (CED) paid attention to seven types of capital: natural, cultural, human, social, political, financial and built.”⁵

The Iowa Community Wellness Grant program implemented program planning and project evaluation with the assistance of Mary Emery, North Central Regional Center for Rural Development at Iowa State University. Dr. Emery provided consultation on using the Community Capitals framework (CCF) for evaluation and then conducted an evaluation of 24 CWG Success Stories and 22 Final Reports using the CCF. A general description of the CCF

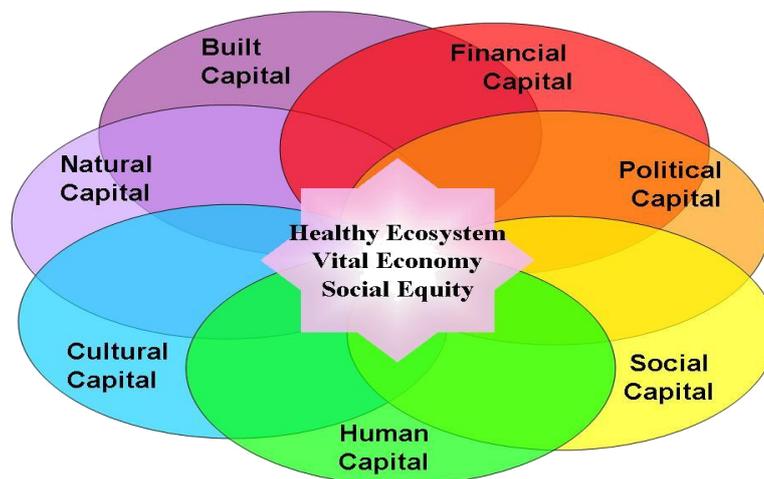
⁴ Foster-Fishman, P.G., Berkowitz, S.L, Lounsbury, D.W., Jacobson, S., & Allen, N.A. (2001). Building Collaborative Capacity in Community Coalitions: A Review and Integrative Framework. *American Journal of Community Psychology* 29(2):241-261.

⁵ Flora, C, Emery, M, Fey, S, & Bergendahl, C. (2008) Community Capitals: A Tool for Evaluating Strategic Interventions and Projects. North Central Regional Center for Rural Development, Iowa State University.

follows, along with measurement of reported growth of the Community Capitals in communities as a result of having a Community Wellness Grant project.

The following is an excerpt from the Mary Emery report analyzing the CWG reports using the Community Capitals Framework. “The value of applying the CCF is that this framework is explicitly place based. Recognizing that every community is different and that these differences play a key role in the success or failure of change initiatives, the CCF allows us to analyze these differences in community systems by looking at the assets (and lack of assets) across the seven capitals: natural, which situates the community and provides boundaries to what is possible; cultural, which includes how the community operates as well as its culture and traditions; human, including both skills and knowledge as well as self-efficacy; social, which looks at the networks in which people interact and the norms regarding trust and reciprocity; political, which focuses on access and the use of influence and power as well as whose voices are listened to and whose are silent; financial, including loans, grants investments and donations; and built, which includes infrastructure (Flora and Flora, 2008). According to Flora and Flora, initiatives that mobilize assets from across the capitals and result in additional assets in multiple capitals are likely to be more sustainable. Thus, the CCF helps us understand the balance among the capitals as communities invest assets in their work that result in additional assets and increased capacity. The CCF also allows us to look at the ripple effect of an intervention to see what impact it might have on the community system. Finally, the CCF helps us better understand change by highlighting the process of change and the resulting interaction among the capitals. For instance, several assessments mentioned building knowledge and skills which led to people taking on other projects such as raising money which was then invested in other capitals (built), and, at the same time, created new social capital which led to additional collaborative efforts.”^{6, 7} See Figure I to view the CCF.

Figure I Community Capitals Framework (Flora & Flora, 2008)

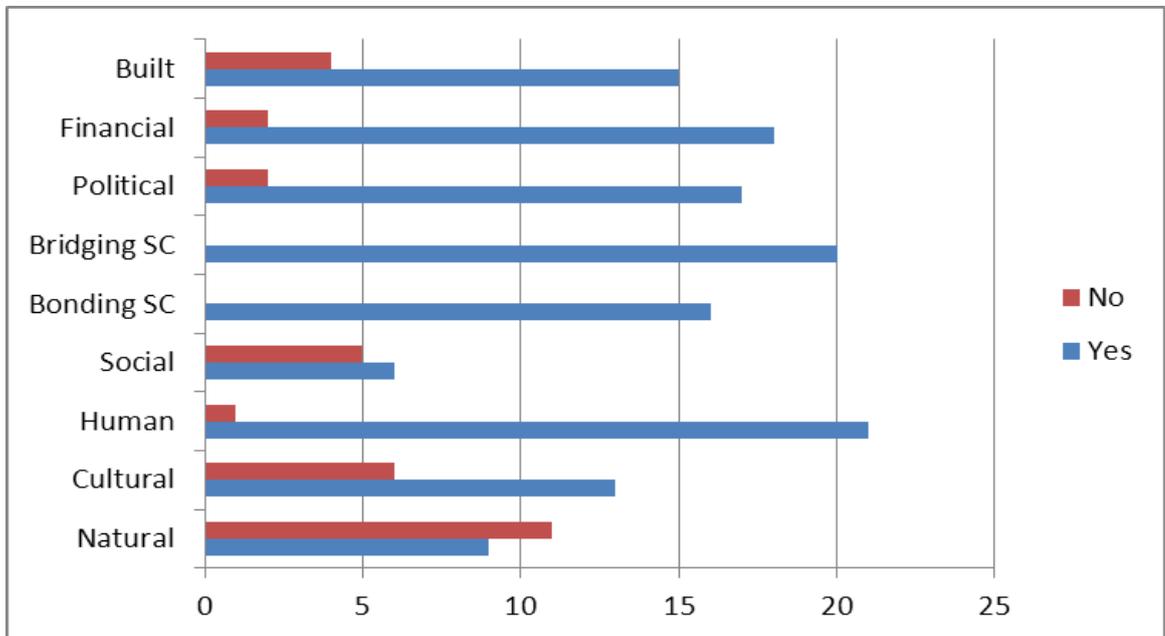


⁶ Emery, M. Report: Towards an understanding of the community change process: an evaluation/analysis of 22 Community Wellness Grant Community Capitals Assessment. (p. 6.) September, 2010.

⁷ Flora, C.B. & Flora, J.L. (2008). Rural Communities: Legacy and Change. 3rd Edition. Boulder, CO. Westview Press.

Table III below lists the capital areas that were reportedly increased during the current CWG project period. Almost all communities reported increasing human capital, with bridging social capital and financial capital following close behind. All communities reported growth in community capital areas.

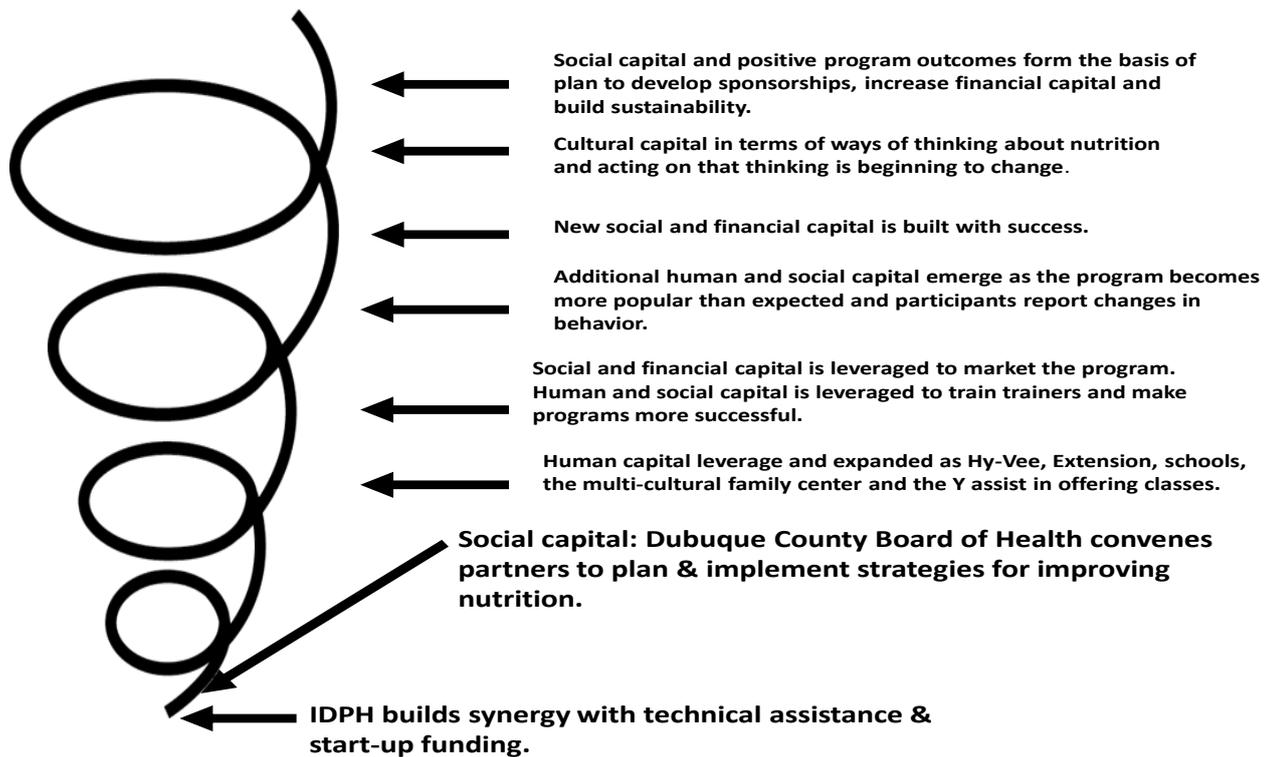
Table III Asset Growth Over Grant Cycle



The CCF results are preliminary as knowledge of the CCF framework is increased and the reporting structure is improved to assist communities in identifying specific assets that would fall into each capital area.

Figure II (Emery, 2010) creates a visual of how community capitals are increased over the course of a project period. The Dubuque County Community Wellness Grant is used as an example.

Figure II Dubuque County Meals Program Brings Families Together (Emery, 2010)



It is common to hear CWG projects report that a particular project, outside of the planned CWG initiative(s), would never have happened if a county did not receive CWG funding and technical assistance. For example, Cass County has reported the following initiatives that have occurred outside of the CWG projects since FY2006: a local Farm to School chapter was established; a non-profit corporation converted existing space to a fitness room; the Cass County Food Policy Council was developed; a Regional Foods Coordinator with a five year funding commitment was hired and the county contributes to the support of that position; several businesses have established wellness committees or wellness coordinators; and a Food, Fitness, and Fun 4-H club has been established. The synergy created by the Community Wellness Grant funding, the leadership of the local board of health working through the local coalition, and the IPDH technical assistance model effectively illustrates the spiraling impact that occurs across the community capitals.

Most of the CWG Projects mentioned having an impact on financial capital. Examples include:

- Donations
- Grants
- Community foundations
- Support from the school district
- Support by assuming costs of insurance and maintenance
- City or private sources supply donations
- Dollar value of volunteer time

The economic impact of the CWG Project will not be fully recognized until long after the project period ends. Certainly, funds have been leveraged and other financial capital has been added during the CWG funding cycle. The term “public value” is being used in the work of both Mark Moore and Laura Kalambokidis. The idea of public value is that the services and information provided will impact a larger number of individuals than just those directly receiving the benefit. For example, participants of classes learning healthy cooking skills and being more active might use this new knowledge to make changes that their children and grandchildren will also benefit from. Reduced behavioral referrals in projects with a mental health focus may allow for more learning time for not only the child, but for his/her classmates as well. Trails and fitness centers see continued use for several years after the projects have been completed. For these reasons, it has been estimated chronic disease programming can see a return on investment of \$3-\$4 for every \$1 spent.

C. Quality Improvement

Three agencies that were funded by the Iowa Healthy Communities Initiative Grant Program are now working to improve the outcomes of their obesity prevention projects. These agencies have formed a quality improvement (QI) mini-collaborative and are operating as a learning community focused on identifying and implementing quality improvement strategies for adult obesity prevention initiatives. Each agency is responsible for developing a project plan that incorporates the use of a QI team, the Institute for Healthcare Improvement (IHI)’s Model for Improvement, Plan-Do-Study-Act (PDSA) cycles, QI storyboards, and other QI tools to focus improvement efforts on components of their obesity prevention projects that are specific to increasing physical activity in adults. Since March 2010, agencies have:

- Attended QI training provided by the Public Health Foundation (sponsored by IDPH);
- Formed QI teams of at least three people (with at least one member being a part of the original obesity prevention project funded through the Iowa Healthy Communities Initiative Grant Program); and
- Begun to use the IHI Model for Improvement to create aim statements, select measures, and use various improvement tools, including PDSA cycles, to implement and monitor measurable improvements.

QI projects are slated for completion in March of 2011; currently, agencies are at different stages in implementing their projects. In addition to identifying opportunities for improvement in increasing physical activity in adults, each team has also identified and begun work on improving other components of their obesity prevention initiatives.

QI teams will be asked to share their results by speaking at the Public Health Learning Congress in April 2011. The learning congress will provide opportunities for local and state public health partners to learn more about QI and the work of the Improving Obesity Prevention Outcomes Mini-collaborative.

D. Achievement of Statewide Planned Outcomes

The (24) 2009-10 Harkin Community Wellness Grant Projects proposed 164 measureable objectives to meet. At the conclusion of the project period, 86% of the proposed process and outcome measures were achieved. Barriers to meeting objectives included weather-related cancellations and competing priorities for organizations and individuals. A few of the met objectives are listed below. Many more are included in Section III of this report.

- 61% of Cass County participants using health promotion programming maintained their BMI (BMI of 25-29.9) or decreased their BMI by 2 points (BMI 30 and over).
- Behavioral referrals at the partner schools in Black Hawk County reached an average of a 12.7% decrease in behavioral referrals.
- Nearly 75% of the Clayton County Live Healthy Live Well participated engaged in weekly physical activity events during the program; 60% of participants continue the physical activity levels after the series of classes. Physical activity during the class series from participant journal averaged 250 minutes per week.
- 73% of Johnson County families participating in “Family Nights Out” report making changes in meal patterns.
- In Mitchell County, the “no show” rate reduced from 30% when clients had to travel to the regional mental health center to under 13% when services were provided locally.
- In Lee County the pre/post surveys using the CATCH program revealed the following results:
 - Kindergarten through 2nd grade students reported a 12% increase in consumption of fruits and vegetables, and a 16% increase in being more physically active.
 - Students in grades 3-5 reported a 7% increase in fruit consumption and a 3% increase in vegetable consumption.
- In Woodbury County, the Siouxland District Health Department collaborated with partners to form a local worksite wellness coordinating council. A 2010 survey of area businesses revealed that 85% are offering a worksite wellness program; up from 66% in 2009.

Public awareness of the local issue being addressed by the coalition is another measure of success. In a survey to project directors at the beginning of the grant period, 21% of respondents reported there was not much awareness of the community-wide issue. By the end of the project period, 0% of the projects reported not much awareness, 17% reported the awareness of the issue was a little better and 83% reported the awareness was either much better or a great deal better.

One quote from a CWG project’s final report best describes how the Community Wellness Grant program is important to local communities. “This grant has been a wonderful experience for Dubuque County... This is the best grant we have ever had. Participants and Wellness Committee members have spread the word about the benefits of this program.”

The Iowa Department of Public Health’s work plan and results for the Iowa Healthy Communities: Harkin Wellness Grants are listed in Appendix A.

III. Local Impact

Summaries of the (24) 2009-10 Community Wellness Grant projects were compiled by the IDPH assigned health consultants (community coaches).

Adams County Board of Health

In Adams County the Community Wellness Grant focused on wellness-staff training, screenings, community education and the purchasing of fitness equipment for the wellness center. Throughout the course of the project the Alegent Health Mercy Hospital worked with the Adams Community Economic Development Corporation (ACEDC) to purchase the former Pamida building that had sat empty for over 18 months and renovate it into the Alegent Health Wellness Center and Medical Equipment.

Outcomes:

- Seven educational programs provided to the community. 250 different county residents participated in at least one educational program.
- Two screenings were provided to 97 residents.
- Purchased new equipment for fitness center.
- Organized Adams County Community Walk. The nine week program had 500 participants.
- Throughout the two year process of this grant 600 people in Adams County have been reached with one program or another. Awareness of wellness and the importance of it was made. The community knows who to contact for questions or programs.
- Membership at the Wellness Center has increased from 125 members to 301.

Success Story:

The equipment purchased and programs implemented during the first year of the grant set the Alegent Health Wellness Center and Medical Equipment in prime position to make a move from 2500 square feet to over 19,000 square feet in a new location. The project started in June 2009 with the purchase of the building and opened May 14, 2010. The target groups are Adams County residents, guests and even Montgomery, Taylor and Cass counties. The Mercy Healthcare Foundation provided funding for the renovation. The cost of the renovation was \$303,000. New equipment was received from the Healthy Communities Initiative (Community Wellness) Grant. A local contractor drew up plans free of charge in September 2009 and in December 2009 demolition began. Many local businesses were used throughout this project from flooring, to electrical, to dry wall to the lumber. Residents of Adams County know how to work as a team and once again Adams County has shown that they love success and can make it happen. Because funding from this grant allowed the project to get ahead of the game with programming and more equipment, a spectacular new home for the Wellness Center was created.

Black Hawk County Board of Health

Black Hawk County Public Health engaged in a mental health grant project which focused on a youth mental health coalition and expanding school-based mental health services in Waterloo schools. The project built on an existing program and successfully expanded it to additional schools and expanded the reach within previously served schools to more fully meet demand.

Outcomes:

- During the 2009-2010 academic year, onsite mental health services were provided to 6 of 12 public elementary schools in the Waterloo Community School District.
- Behavioral referrals at the partner schools reached an average of a 12.7% decrease in behavioral referrals.
- One FTE Licensed Mental Health Professional was hired by Black Hawk-Grundy Mental Health Center.
- The Black Hawk-Grundy Mental Health Center staff, providing onsite mental health services to youth in the schools, has all been trained in several evidence based practices and has implemented these practices in their work with youth and families. These evidence based practices include Coping with Depression, Trauma Focused Cognitive Behavioral Therapy, play therapy and other related practices.
- All students are tracked and evaluated using the Kalypso database which links directly to school performance measures, behavioral referrals and attendance data.
- Continued expansion of membership of the Youth Mental Health Task Team and discussions about joining forces with other task teams with similar interests

Success Story:

Black Hawk County received many comments from staff, collaborators, stakeholders, and families that it is essential to have mental health services located in the schools so that all have access. From a systems perspective, it was found that providing school based services allows students and their families several benefits. First, parents do not have to leave work or provide transportation to appointments. Next, students are out of class for a much shorter time period than they would have been if they utilized outside services. Third, students whose families have limited resources including transportation, this allows those students access to the same services regardless of parental resources.

Cass County Board of Health

The Cass County Board of Health Iowa Healthy Communities Initiative carried out a variety of health promotion initiatives through the Healthy Cass County Coalition. During the grant period, the following projects were initiated: Walk to School Day, Walking School Bus, National Trails Day Bike Ride, Alzheimer's Memory Walk, Cass County Health Summit, Farm to School, Go the Distance Day, Healthy Cass County Sprouts, Hy-Vee May Day Walk, Live Healthy Iowa, Run Walk Ride, Step up to the Plate, Relay for Life, Tivoli Fest SAG Station, and Healthy Life Way. To view the many resources, visit the Healthy Cass County Web site www.healthycasscounty.com

Outcomes:

- Healthy Cass County Coalition membership expanded. Total in-kind time of coalition members totaled \$31,609 over the 2009-10 project period.

- 34% of Cass County residents participated in health promotion programming, far more than the original goal of 20%.
- 61% of Cass County participants using health promotion programming maintained their BMI (BMI of 25-29.9) or decreased their BMI by 2 points (BMI 30 and over).
- A community survey was conducted in 2008 and again in 2010 with 475 and 480 residents responding, respectively. The following survey results were reported:
 - In 2008, 6.4% of respondents reported consuming five or more fruits and vegetable per day. 2010 survey results: 7.9%.
 - In 2008, 37% of respondents reported they did not participate in any physical activity in the past month. 2010 survey results: 34%
 - In 2008, 56% of respondents reported they have been told their cholesterol is high. 2010 survey results: 53%
 - In 2008, 19% of respondents reported that they smoke. 2010 survey results 10.9%.
- Local growers are reporting they have expanded their businesses to meet demand.

Success Story:

A School Local Foods Festival was initiated with 250 students and 50 local growers and community members attending. Local farmers displayed and provided samples of fruits and vegetables, children tasted the local products and were given \$5 in “coupons” to “purchase” produce from the vendors. The produce and a handout describing the event and the benefits of increasing the consumption of local foods were sent home to parents. Events like the School Local Foods Festival encourage residents to continue purchasing locally grown foods. Annual data on the amount of retail sales of local foods in Cass County is collected and has shown an increase. The Healthy Cass County Web site provides information on local food access and supporting nutrition and health information.

Since FY2006, Cass County has demonstrated success in the areas listed above and constructed a permanent wellness center with less than \$220,000 in Iowa Healthy Communities Initiative: Harkin Community Wellness Grant funding over a 5 year period (average <\$44,000/year).

Clayton County Board of Health

The Clayton County Board of Health Community Wellness Grant focused on three separate and simultaneous health improvement initiatives. The Oral Health Prevention Project was implemented for 2nd and 3rd grade students in the Central Community School District. With the help of the volunteer services of local dental professionals, students receive dental screenings, fluoride varnish applications, preventive sealants, and oral health education. The second initiative was the implementation of Kidshape, a weight management program developed for children ages 6-14. Lastly, Live Healthy Live Well classes were implemented to prevent disability in people with chronic disease.

Outcomes:

- 100 2nd & 3rd grade students received a visual dental exam by a dentist and dental hygienist.
- 96 students received fluoride varnish.
- 57 students received dental sealants
- Five children with unmet dental needs were referred on for care.

- 100% of the children identified as having a priority unmet dental need received follow-up care.
- A mother of a student was quoted as saying, “I’m pleased that my child could participate, since our dental insurance does not cover sealants.”
- Nineteen percent of eligible children from Central Community School and MFL MarMac School participated in the Kidshape program with at least one parent.
- 76% of Kidshape program participants (children) and their parent attended all of the nine week sessions. Parental participation was required.
- 27% of Kidshape program participants from one school maintained their pre-BMI. 18% percent of Kidshape program participants decreased their BMI.
- Children involved in the Kidshape program saw improvement in all assessment areas except one. Improvements were noted in the “curl-up”, “push-up”, “V-sit”, “pull-up” and the “shuttle run.”
- One Kidshape student could not believe the class was over-“I want this to go on forever.”
- 98% of Live Healthy Live Well participants reported making changes in at least one healthy behavior.
- Nearly 75% of Live Healthy Live Well participated in weekly physical activity events during the program; 60% of participants continue the physical activity levels after the series of classes. Physical activity during the class series from participant journal averaged 250 minutes per week.

Success Story:

Due to the 2008 flooding, Live Healthy Live Well participants had limited access to an area trail for their out-of-class activity. The Elkader Fitness Center allows participants to join the exercise class for just \$20/month, a 40% reduction from the regular fees. Several participants continue to meet 3-4 times weekly at the Elkader Fitness Center to exercise and offer social support to others. The Central Community Hospital has committed to the program and has put funds in their budget, covering overhead cost of the program and recertifying the instructor based on success of the program. Classes in Chronic Disease Self-Management had not been offered prior to the grant.

The sustainability of Clayton County’s other 2 initiatives are also underway. The Central Community Hospital Foundation board unanimously agreed to financially support the oral health program with \$300 per year for supplies. The school administration and the local dentist have committed to continuing the program. Communication with Elkader and Clayton County Economic Development is continuing in regards to a dentist succession plan. Sustainability options are being reviewed for the Kidshape program including involvement of community partners and initiatives including the Local Board of Health Community Health Needs Assessment/Health Improvement Planning process, local business, the medical community and faith-based organizations.

Dallas County Board of Health

Dallas County Public Health implemented a project to improve nutrition and physical activity. The Coordinated Approach to Children’s Health (CATCH) was implemented for 3-5th grade students in two school districts. The VERB Summer Scorecard was also implemented throughout the county for two summers.

Outcomes:

- CATCH training provided to 24 school staff and proficiency established
- Participating students demonstrated change in knowledge and behaviors. West Central Valley showed 57% increased scores by an average of 3 points. Perry showed 50% increased scores by an average of 2.5 points.
- Participating student BMI stabilized.
- 80% (goal 75%) of participating students reported an increased use of Dallas County's recreational assets during summer 2009 compared to the previous summer.
- 100% (goal 80%) of participating students reported finding participation in the physical activities during the summer of 2009 as a positive experience.

Success Story:

The *Cool Deals* and *Fun Events* on the Dallas County VERB Scorecard highlighted low cost, mostly free, options for VERB participants to engage in physical activity. Community partners of VERB provided prizes for drawings to be used as incentives for youth to complete scorecards which motivated them to be regularly active during the VERB campaign. A full time intern from Iowa State University allowed Dallas County VERB to offer events such as volleyball clinics, tennis clinics, kickball/wiffleball games, and disc golf events on weekends and evenings. This extra staff member also provided great benefit in the areas of promotion and marketing of a positive image for Dallas County VERB.

A parent reported: "VERB was a great time for my family to get out of the house and get outside moving around. My daughters looked forward to it every day and night that a VERB event was planned whether it was skating, Frisbee golf, softball, swimming, biking, or volleyball. It was a lot of fun and kids love getting prizes for exercising. How else can you explain winning a Wii? We look forward to making this summer an even bigger success as the girls have invited all of their friends to join VERB!"

One student responded with: "VERB is a great experience as it helps you to stay in shape while getting together with friends all summer long. Best of all it keeps you off the couch!"

Another student replied: "You should try VERB because it helps you stay active and you can win awesome prizes!"

Decatur County Board of Health

The goal of the Decatur County Board of Health CWG was to increase physical and activity and promote community health and wellness of Decatur County residents through the completion of a 0.4 mile interlinking portion of the Lamoni Recreational Trail.

Objectives:

- Under the supervision of the Lamoni City Maintenance Department, a volunteer crew completed the 0.4 mile trail.
- Fifty volunteers contributed a total of 933 hours toward the project, estimated at \$19,500.
- Friendships and camaraderie were built in pursuit of community betterment.
- A survey of trail usage and attitudes was performed through use of the internet, newsletter, and newspaper under the direction of Graceland University.
 - 89.2% of respondents reported having used the trail.
 - 97.8% of respondents reported the extended Lamoni Recreational Trail has been a benefit to the community.

- 44.7% of respondents reported increasing the number of times they walk, bike, or run per week since the trail extension was completed.

Success Story:

The Lamoni Trails Committee discusses matters related to improving trail usage on a monthly basis. Promotional activities to draw travelers to the trail are under discussion, including placement on the Iowa Recreational Trails Map. An attractive four-color brochure promoting trail use has been produced, updated and widely distributed. Memorial benches are regularly added along the trail, and a shelter house is under consideration as an Eagle Scout project. Gardens and flower plantings have been placed in several locations along the trail. School officials placed attractive flowered landscaping alongside the trail's approach the school's new electronic sign. Those using the trail for exercise universally report their observations of an increase in trail usage by cyclists and walkers of all ages. A few "ad hoc" walking groups have formed. The Lamoni Chamber of Commerce and Graceland University are now collecting unused bicycles from around town in a planned Use-a-Bike program to provide free transportation to the Graceland University Campus and downtown. The fleet of "Lamonicycles" will be coordinated by having the same color.

Dubuque County Board of Health

Reinventing the Family Meal (RIFM), a program of the Dubuque County Wellness Committee, is a series of three classes promoting healthy, economical meal preparation at home and the benefits of eating meals as a family. Two hundred thirty-two participants attended *Reinventing the Family Meal* classes Sept 2009 through June 2010 as part of their 2009-2010 Community Wellness Grant and many participants are eager to take the course again. Participants completed pre-test, post-test, 2 week post-test by phone and 3 month post-test by phone. Participants demonstrated their learning and behavior change by responding to ten question pre/post test. Post test results show that participants showed improvement in the following areas: planning for meals, shopping with a list, eating meals as a family, eating more than one kind of fruit each day and properly defrosting meat. Participants indicated that they enjoyed the classes and that it was a positive experience.

One of the class participants shared the following in an e-mail with one of the Hy-Vee dietitians that taught the class:

"I started making some of the meals we prepared in the class for my family at home and we have started eating as a family as well as eating healthy (which we could use some more of). I have made the Chicken Rice Casserole several times now and my family loves it! Instead of adding little salt to the recipe I use none! By cooking healthier for my husband, I also cooked healthier for the whole family and started losing weight. So far I have lost about 20 pounds with exercise included with the diet. After that my mom asked me to join a cooking class with her and my two kids, of course I said 'Yes!' right away. We enjoyed the classes a lot. The kids even love to help with cooking the meals."

Success Story:

One of the objectives of the Dubuque County CWG project was to promote long-term infrastructure and community consensus building by forming a Dubuque County Food, Fitness, and Wellness Committee, reporting regularly to the Dubuque County Board of Health. The Wellness Committee has established long term relationships and working partnerships with multiple agencies. Active partners include Hy-Vee Food Stores, Visiting Nurses Association, Dubuque County Health Department, Finley Hospital, County Extension Office, Dubuque YMCA, Multi-cultural Family Center, Dubuque Community Schools, and Crescent Community Health Center. The Dubuque County Board of Health and the Wellness Committee have embraced the program and agreed to work with Crescent Community Health Center to expand the program beyond the nutrition education focus to include promotion of fresh fruits/vegetables and increasing access to fresh produce.

Harrison County Board of Health

In Harrison County, a wellness center funded by a 1 cent local option sales tax was built at West Harrison High School and the equipment for the center was purchased with funds from the Community Wellness Grants. The West Harrison Wellness project has sparked a heightened collaboration between partners within Harrison County. The project has increased collaboration between the Harrison County Board of Health, the West Harrison School Board, the West Harrison Booster Club, and the West Harrison Wellness Committee consisting of local health professionals, school administration, Harrison County Public Health, students, and school staff. The project has brought a greater collaboration between the school district and the communities and people it serves.

Outcomes:

- Since the wellness centers implementation, members have requested an increase in hours of operation and opening earlier in the mornings. Hours of operation for school staff are 4:00 a.m.-midnight Monday through Sunday and the wellness center is open from 4:00 a.m. to 6:00 a.m. and 6:00 p.m. to midnight Monday through Friday and from 4:00 a.m. to midnight Saturdays and Sundays.
- Membership includes 300 total members. In addition the West Harrison Community School District sought to have their health insurance premiums remain steady throughout the project period, which they achieved.
- All of the membership funds are placed in a maintenance fund to sustain the equipment.

Success Story:

One unexpected large group that purchased memberships for their members was the Mondamin Volunteer Fire and Rescue Department. This was a surprise as the members are non-paid volunteers, but the Department saw the value in healthier people responding to fire and rescue calls.

Jefferson County Board of Health

Jefferson County Public Health and the Jefferson County Wellness Action Coalition built local capacity to address wellness issues by collecting population data and wellness needs and developing activities targeting nutrition, physical activity and tobacco use prevention. Coalition capacity was increased and a county wellness strategic plan was developed. A

preschool activity provided nutrition education, worksites improved their wellness policies, and a two mile section of trail was developed.

Outcomes:

- Four local business/employers improved their worksite wellness policies improving employee's access to or time available for wellness activities.
- A county wide wellness strategic plan was developed, bringing together diverse partners from throughout the community and county.
- Green prescription pads and physical activity prescriptions are being used by 3 of 7 family physicians.
- 14 preschool nutrition programs were run at seven different locations. A total of 214 children participated between the ages of 3-5.
- The Fairfield School District is beginning to include locally grown foods in the school lunch menu.

Success Story:

Encouraging good fitness and nutrition choices in the workplace benefits everyone concerned, resulting in a healthier, happier workforce. A local Jefferson County employer made the following wellness policy changes to positively impact their employees and the community:

- They have started a company aviary so the employees can have their own honey.
- They planted part of their company land in native prairie
- They planted an orchard of chestnuts
- They gave easements to the local Trails Council so that the loop trail could go through their property.
- They give financial payouts to anyone who bikes or walks to work.
- Priority parking is for bikers and disabled.

Johnson County Board of Health

In 2009 the Johnson County Board of Health received a Community Wellness Grant administered by the Iowa Department of Public Health. Their goal was to improve the health of families and kids attending an at-risk school, Grant Wood Elementary. A 2006 survey showed that 25 percent of the students at Grant Wood were overweight or obese. In addition, three of every five children enrolled there are currently receiving free or reduced price lunches—twice the average for schools in the 11,000-student district.

To achieve their goal, “to improve the health of K-6 students at Grant Wood Elementary,” Johnson County local board of health, Iowa State University Extension, Iowa City School District and community volunteers, all part of the community wellness coalition came together to host six “Family Night Out” events. At the events, students and family members enjoyed a nutritious meal together, and then participated in three educational programs. The educational programs were designed to improve nutrition, physical activity levels, and health literacy.

Outcomes:

- From the six “Family Night Out” sessions 293 adults and 340 students engaged in family activities that improved nutrition, physical activity and literacy.

- 31% of girls and 38% of boys in 4th-6th grades reported developing an individualized fitness plan for outside of school hours.
- 73% of participating families reported making changes in meal patterns.
- 73% of participating families reported making changes in snack and beverage choices at home.
- 62% of participating families reported increased exercise at home.
- 57% of participating families reported increased literacy at home.

This data shows the significance of environmental change that has happened not only at the school but also spills out into this at-risk pocket of the community. The community wellness grant coalition has secured sustainability for this grant by adding new members. New members include community parents, teachers, 4-H members and a newly formed partnership with the Childhood Obesity task Force and a Grant Woods Elementary neighborhood coalition. Many of the community partners continue to provide in-kind support by attending coalition meetings for other initiatives and helping to complete projects and tasks when asked.

Success Story:

Excerpt from Jan/Feb 2010 IDPH Focus Newsletter:

“The first Family Night Out, held last February, featured whole wheat goulash, a demonstration of fitness testing using a heart-shaped obstacle course, an introduction to health-related vocabulary, and ideas for increasing fruit and vegetable intake. The event drew 35 participants.

For the second event, participation nearly tripled. On that April night, more than 90 people showed up to learn about body mass index and easy ways to remove fat from cooked ground beef. By the third event in September, which included sub sandwiches and setting goals using pedometers, participation in Family Night Out was nearing 200 per event.”

Kossuth County Board of Health

Kossuth County implemented the Iowa-developed “Pick a *better* snack™ & ACT” program in 3rd grade classrooms in two school districts in their county. The purpose of the program is to help third grade students eat more fruits and vegetables and increase physical activity. Every month students in third grade classrooms were handed bingo cards. Squares on the cards included things like eating a family meal together, ride a bike, play catch, eat a grape tomato or frozen fruit. On the back of the card were recipes and activity ideas, perfect for the whole family to explore. Prizes were awarded to students that brought in completed cards. Kites, jump ropes and balls were among some of goodies they could earn through their participation. An educator visited classrooms monthly and taught fruit/vegetable and physical activity lessons along with presenting tasting opportunities of the fruits and vegetables that were featured each month on the bingo cards.

Outcomes:

- Pre/post surveys showed positive impact of the program that reached 209 students and their parents and five teachers over the project period. In both schools, students were significantly more aware of Pick a better snack™ & ACT (PABS) program logos and messages. Students showed a significant increase in preference for nine out of the 20 featured fruits and vegetables in the Titonka School and 12 out of the 20 in the Bryant school. Students at Bryant School showed a significant increase in self-efficacy to *fix*

fruit and vegetable snacks at home. Parents showed significant improvements in awareness, and modeling and support behaviors from pre-to-post surveys. There were statistically significant increases in percentage of parents who had seen campaign logos, parent newsletters, bingo cards, PABS messages or heard of PABS and PABS messages. There were significantly more parents engaged in the following behaviors:

- Offering fruits and vegetables to their child for snacks daily
- Keeping fruits and vegetables available in their home for snacks
- Setting aside daily time for physical activity, like walking, jogging, swimming, biking, or other continuous activities for at least 30 minutes.
- Monthly education was included at the Algona congregational meal sites, averaging 34 participants in 2009 and 2010. Chef Charles newsletter was distributed along with food sampling and physical activity demonstrations. Fruit and vegetable coupons were used as incentives in year two to increase consumption of fruits and vegetables. Seventy-three percent of the participants redeemed their fruit and vegetable coupons
- Two events were held to increase awareness of health resources in the community. In 2009, 30% of participants learned about one or more health agencies and their services that they did not know about before; 44% of participants reported learning of new resources in 2010. Of the 2009 participants, 12 took part in the free screenings and 18 had blood pressure checked. Two people with abnormal screenings reported plans to get a follow-up examination. In 2010, 20 free wellness screenings were given away. Of these, four (10%) got flu shots, 10 (25%) got H1N1 shots, 24(60%) blood pressure screens, and 19 (48%) received BMI screens. Seventy-eight percent answered that they plan to make changes in the things they normally do as a result of anything they learned or participated in; 22% planned to see a doctor and 17% found they or someone in their family had a health problem they did not know about.
- Five high risk families with children 0-5 years old in 2009 and 8 high risk families in 2010 participated in the “Meals to Go” project to improve nutrition and meal preparation skills. All moms thought this was a good experience; all said they would be able to prepare these recipes or ones like them again; and most said they would prepare the recipe again.

Success Story: Third grade teacher Jennifer Christensen started taking part in the program, because she felt her involvement encouraged her students at Bryant Elementary to participate. “I even tried a few [foods] that I haven’t tried before,” said Christensen. Some of the student comments included: “We signed up for dodge ball,” and “We played kickball together as a family.” In addition to exercising as a family, the healthy eating habits also seemed to spread to others in the home. The project coordinator states that many parents reported that their student began insisting on going along to the grocery store. They wanted to get some of the new fruits and vegetables they tried in the program. Students named jicama, mangoes, kiwi, peppers, cucumbers and tangerines as their favorites to munch on.

Lee County Board of Health

The Lee County Local Board of Health implemented a project to improve nutrition and physical activity. The Coordinated Approach to Children's Health (CATCH) was implemented for 3-5th grade students. Wellness screenings were implemented for Lee County employees and a regional conference, SIRCLE Healthy Lifestyle Conference, was conducted in the spring.

Outcomes:

- CATCH training provided to school staff.
- From the pre/post surveys in year two, kindergarten through 2nd grade reported a 12% increase in consumption of fruits and vegetables, and 16% increase in being more physically active. Students in grades 3-5 reported a 7% increase in fruit consumption and a 3% increase in vegetable consumption. (Note: fewer 3rd and 5th grade students took the post survey).
- Central Lee Community Schools implemented Wellness Wednesdays each week. On Wellness Wednesdays, the school menu was reviewed and each item was identified as a "Go, Slow, or Whoa" food. Physical activity was also encouraged throughout the day.

Success Story:

The wellness screenings gave Lee County employees (200) a chance to learn their numbers – blood pressure, weight, BMI, and total cholesterol were tested. Each employee was given a card for future use to record their results. This also gave employees a chance to learn about their employer health benefits. Many were unaware what was covered and not covered (example being an annual physical).

Students (425) at Central Lee have really caught onto the CATCH program. Teachers have reported students educating their parents on what they have learned, and on the new foods they have tried. The taste testings have been well received by students and teachers. A couple of teachers have said the snacks have been combinations they would have never thought of putting together, and were surprised how much the students enjoyed it.

SIRCLE's Healthy Lifestyles Conference had a record attendance of 140 people. People not only came from the partnership counties, but also Ames, Bettendorf, Dubuque, and Perry. Speaker topics ranged from how to make food appealing to children from how small changes in lives can make a big difference.

Linn County Board of Health

Vernon Research conducted focus groups and a survey to assess wellness attitudes, opinions and behaviors including fruit and vegetable consumption, barriers to increasing the purchase/preparation of healthy, nutritious meals and opportunities to increase access to healthy food options for the purpose of guiding the Linn County Board of Health's grant activities. The Vernon Wellness Study results were released in February 2009. Findings are used in coalition decision making to accomplish grant goals. Twenty percent of coalition agencies have used data and research suggestions in their organizations.

Linn County Public Health Department created a Worksite Wellness Committee with representatives from each worksite wellness organizations, Public Health Department, and

the Area Substance Abuse Council. The sub-committee created an environmental assessment using Centers for Disease Control and Prevention's Checklist of Health Promotion Environments at Worksites (CHEW) assessment and adjusted it to fit the needs for Linn County. The committee also developed the Linn County Board of Health Healthy Worksite Award which recognized five businesses that scored highest in promoting wellness in the workplace including providing free resources for implementing worksite wellness plans.

Cedar Rapids schools assisted the Healthy Living Coalition in developing BMI toolkits for Linn County schools as a guide to collect and organize student BMI data. One-hundred percent of Linn County schools have received the BMI toolkits. Because of their involvement with the Worksite Wellness Committee, Mt. Vernon Schools initiated a BMI collection process. Many schools reported they were unable to implement a BMI tracking system until 2009-2010 school year. Movement on the collection of BMI data in Linn County is measured using an online documentation support system (ODSS) to which tracks various efforts in the community. Reporting includes tracking coalition progress, events, key community events, and comparing it to local data. Collection of BMI is essential to see the effects the coalition has on the data.

The Healthy Living Coalition was directly responsible for the Building Bridges program. Dietitians on the coalition from an employee owned food chain, along with a representative on the coalition from Hazard Analysis and Critical Control Point and the coalition's Outreach Coordinator collaboratively developed a program to reach out to the Latino population in Linn County to provide and teach healthy food choice and healthy food preparation options. This group continues to grow each month simply by word of mouth. Special emphasis was placed on the use of MyPyramid to make healthy food choices on a daily basis. Surveys were conducted with participating families on knowledge of health behaviors before and after each session and at six month intervals to track behavior change.

- 99% of participants recognized MyPyramid compared to 40% in the beginning.
- 60% reported eating 3-4 servings of fruits and vegetables, an increase from 40%.
- 80% of participants initially reported feeling pain during exercise and after having a discussing topic led by a local fitness instructor the number dropped to 20%.

Success Story:

NAP SACC (Nutrition and Physical Activity Self Assessment for Child Care Centers) was implemented in a pilot early childhood center in Cedar Rapids; Grant School was the site of the pilot project. This pilot project focused on assessing physical activity and nutritional guidelines. Lunch menus were assessed as well as snacks and items brought from home during special treat days, typically birthdays and special holidays. The staff at Grant School adopted a Junk Food Free Zone policy into their existing wellness policy to be implemented for the 2010-2011 school year. All food brought from home for school events, parties, and functions were required to be healthy choices.

Staff also went through *Color Me Healthy* training to implement physical activity into their school curriculum and increase the amount of time children were moving inside. All five

classrooms received a Color Me Healthy Kit and extra children's books to support the lesson plans. Staff who attended the training received CEU's. Children now have more opportunity to move more in the classroom.

Mills County Board of Health

The goal of the Mills County Local Board of Health CWG was to "improve the physical and societal environment of Mills County to support ongoing lifestyle change to improve the health of our residents." Heart disease and obesity rates are above the state average. In addition, the community has limited access to health care services due to their rurality and lack of a hospital in Mills County. This project provides a mechanism for the Healthy Mills County coalition to create local change that will improve the outcomes of residents struggling with heart disease and obesity.

Outcomes:

- In order to sustain the health initiatives and create policy for improved health outcomes, Healthy Mills County Coalition used this grant as an opportunity to grow and strengthen their coalition. As a result, the coalition increased active participation by 67% and increased face-to-face meetings by 40%. This allowed the coalition to develop a long-range plan and provide a blue-print for health promotion planning and activities for the next five year and 10 year period. Immediate areas addressed by the coalition include tobacco free parks, addressing gaps from a city wide walkability assessment (safe crossings needed at two schools) and increasing opportunities for healthy food choices in area restaurants.
- The coalition also promoted "Live Healthy Mills County," a 100 day team challenge program encouraging increased physical activity and selection of healthy food options. The coalition created "Live Health Mills County Kids." As a result of their efforts 720 kids in Mills County participated with 75% reporting an increase in physical activity and 60% reporting making healthier food selections.
- To help meet the goal of improving health status and quality of life for Mills County residents, middle school students were offered the "8 to Great" program. Participants increased asset test scores by 41.11%. The goal was a 25% improvement.

Success Story:

Participation in the adult Live Healthy Iowa program fell short of their participation goal. However, the Healthy Mills County Coalition increased access to the program by developing paper documents for those individuals who lack the access or skill to the on-line program. The adult Live Healthy Iowa program did show positive outcomes with 40% of those registered for the on-line program indicating consistent improvements in physical activity, weight loss and healthy food choices.

Mitchell County Board of Health

The Mitchell County Local Board of Health implemented a project to improve access to mental health services. The project included increasing accessibility to mental health and human services providers through use of TeleHealth Technology and providing school-based therapy. The project also included education about mental illness, mental health, and the effect of alcohol and other drugs on mental health. Lastly, the project improved general

wellness through physical activity and nutrition programs to reduce depression and stress for both adults and youth.

Outcomes:

- A total of 267 outpatient mental health visits were held in FY10.
- The no show rate reduced from 30% when clients had to travel to the regional mental health center to under 13% when services were provided locally.
- The Client Behavioral Survey indicated a 20.5% positive effect on their lives based on risk questions.
- The Prime for Life Program was completed in the high school and reached 64 9th grade students and 82 people at community group events.
- The physical activity and nutrition events reached 593 people over a three month period through a combination of wellness centers, community events, at risk population events, and Iowa State University Extension youth events.

Success Story:

The Mitchell County project brought together residents, health care providers, mentoring program providers, a therapist, a psychiatrist, the educational system, physical fitness providers, and theater/social marketing agency. Mental health services were provided in the public health/human services building and in the school building, providing easy access within the county. The services are being sustained beyond the grant period by the regional mental health provider.

Osceola County Board of Health

The Osceola County Local Board of Health implemented a multi-component wellness program in the community by adding indoor and outdoor physical activity equipment at the Osceola Community Hospital wellness center, creating opportunities for students in the Sibley-Ocheyedan School District to have increased frequency of high intensity physical activity, and increase wellness knowledge of community residents.

Outcomes:

- 75% of the community responded to a survey indicating the strong community interest in wellness.
- 273 county residents participated in a pre- and post-blood screening.
- A wellness program was initiated at Osceola Community Hospital and has expanded to include over 75% of staff.
- Over 600 adults at the school district's parent teacher conferences were provided nutrition education by the Osceola Community Hospital's Registered Dietitian and received information on the heart monitors the students were using in physical education classes.
- Weekly wellness articles were published in the local newspaper, wellness activities were posted on the Osceola Community Hospital's Web site quarterly, and multiple community presentations were conducted on wellness.
- Many community members enjoyed an ice skating rink that was constructed with a plastic cover over the tennis courts. An ice skate rental program is available at the Wellness Center.

- A disc golf course was developed and a tournament was held in June/2010.
- Bike rentals are available at the Wellness Center.

Success Story: All students at Sibley-Ocheyedan School District are required to use a heart monitor during physical education classes. A heart monitor is used for students to learn how to reach their target heart rate during exercise and maintain it for a set time. Students were given a baseline assessment to determine how to build an active, healthy lifestyle.

Polk County Board of Health

Polk County aimed to create wellness coalitions on the Southside of Des Moines to increase nutrition and physical activity opportunities. In addition they implemented the SWITCH™ program at Lovejoy Elementary School. SWITCH is an evidence-based program developed by the National Institute for Media and the Family to promote healthy community, school and family environments. SWITCH stands for Student Wellness Initiative Toward Changing Health, and is designed to promote increased physical activity, sound nutritional choices, and moderate screen time which will increase the physical fitness and overall health of children. The SWITCH program provides a practical and fun way to help children and families: SWITCH what you DO (get at least 60 minutes of activity each day), SWITCH what you VIEW (spend no more than 2 hours each day in front of a TV, computer or phone screen), and SWITCH what you CHEW (eat at least 5 fruits and vegetables each day).

Outcomes:

- Neighborhood survey conducted, 587 of 2491 surveys were returned, a return of 24%. Priorities identified through the survey include:
 1. Access to indoor and outdoor facilities at Lincoln High School
 2. More access to Gray's Lake Park
 3. Crime/Safety
 4. More sidewalk accessibility
 5. Having a south side Farmer's Market
 6. More adult education classes offered at Southside schools
 7. Bike Lanes
 8. Outreach, i.e. health fairs, mobile screenings
- Two walkability assessments completed.
- Two nutrition environment surveys completed.
- After four months of implementing the SWITCH program:
 - 88% of the 3rd grade students said they have increased how much physical activity or exercise they do
 - 90% of the 3rd grade students said they have been trying to eat more fruit
 - 79% of the 3rd grade students said they have been trying to eat more vegetables
 - 62% of the 3rd grade students said they have been spending less time watching TV and playing video/computer games
 - 87% of the 3rd grade students said they like the SWITCH packets and activities
 - 37% of the students said that if they asked their parents about SWITCH, they would know the three SWITCH words; 13% of the students said their parents would not know the three words; and 50% of the students said they did not know if their parents would know the words

Success Story: Lovejoy Elementary School is located within South Park Neighborhood, which is one of two focus neighborhoods for Polk County’s Community Wellness Grant. Lovejoy Elementary has a diverse student population consisting of approximately 90% free/reduced lunch program participants, 40% English Language Learners and 60% minorities. Planning for the implementation of SWITCH with the 2009-2010 3rd grade students began in October 2009, with the assistance of a Kinesiology Graduate Student from Iowa State University, as well as the PE Teacher at Lovejoy. The 3rd grade program concluded the last week of April 2010.

SWITCH program materials were designed to be used with a 3rd, 4th, or 5th grade level student and their families. For this initiative, the three 3rd grade classes at Lovejoy Elementary were selected to participate. This was approximately 52 children. SWITCH is designed as family-based program to promote collaboration with schools and communities. The SWITCH materials provide parents and children the tools they need to make the “switch” to health and wellness, as well as raise community awareness about childhood health risks and solutions.

Comparing the student surveys from 2009 to 2010 showed an increase in the healthy choices and behaviors that the 3rd grade students adopted during the SWITCH program. See table below:

<p align="center">Spring 2009 Survey (47 students completed)</p> <p><i>Since you received your SWITCH packets and I have been coming to your gym classes...</i></p>	<p align="center">Spring 2010 Survey (52 students completed)</p> <p><i>Since you received your SWITCH packets and Rachel and I have been coming to your gym classes...</i></p>
<p>Have you increased how much physical activity or exercise you do?</p> <p align="right">75% Yes</p>	<p>Have you increased how much physical activity or exercise you do?</p> <p>88% Yes</p>
<p>Have you been trying to eat more fresh fruit?</p> <p>85% Yes</p>	<p>Have you been trying to eat more fresh fruit?</p> <p>90% Yes</p>
<p>Have you been trying to eat more vegetables?</p> <p>77% Yes</p>	<p>Have you been trying to eat more vegetables?</p> <p>79% Yes</p>
<p>Have you been spending less time watching TV/playing video or computer games?</p> <p>62% Yes</p>	<p>Have you been spending less time watching TV/playing video or computer games?</p> <p>62% Yes</p>

Poweshiek County Board of Health

Poweshiek County is making walking and biking the center of their community. Their community wellness grant expands the Grinnell Area Recreation Trail, promotes the integration of walking and bicycling into daily routines and engages citizens in the use of the

local trail for reaching employment, shopping, fitness, and recreation destinations. The project is led by a coalition and always considers the sustainability of the project.

Outcomes:

- Expansion of the Grinnell Area Recreation Trail.
- 40 people in attendance at the trail ribbon cutting.
- Increase of trail users from 354 to 561.
- 19,007 community residents impacted
- Grinnell ranked in the top three of every category in the statewide Bike to Work Week challenge.
- Five employers participated in the bike/walk commuter program.
- 52 businesses signed up to participate in the bike/walk to shop program.
- 84% of bike/walk to shop program participants reported they are walking and biking more.

Success Story: The Community Wellness Grant provided an opportunity for greater wellness collaboration with the community of Grinnell. Entities that loosely worked together in the past came together on a regular basis to plan and execute health lifestyle programming, building relationships that will last beyond the grant period and ensure sustainability of the programs. In addition, creative partnerships were forged to encourage program expansion on a community wide basis, such as the Chamber of Commerce partnership to launch the Bike N' Hike to Shop program. Because of the Community Wellness Grant our coalition was able to expand the reach of the programming in the community and this success is demonstrated in the results from the trail count, the number of businesses involved in the Bike N' Hike to Shop program and the outstanding participation in the Bike to Work Week challenge. Moreover, many community members have shared how the program has changed their thinking and behavior about how they commute to work, to shop and other destinations that are easily accessible by bike or on foot.

Ringgold County Board of Health

Ringgold County Local Board of Health is working to improve the health of children in Ringgold County. In collaboration with local partners and coalition members, a variety of activities have taken place. Upgrades to playground equipment have been completed at Judge Lewis Park in Mount Ayr. In addition, Sites for Learning (SFL) programming has received funding with a focus on nutrition and physical activity for children and their families.

Outcomes:

- New playground equipment installed.
- Recreational opportunities provided to K-6 students for 6 hours per week for 36 weeks through the Sites for Learning after-school program.
- Nutrition education provided to K-6th grade students for six hours per week for 36 weeks through the Sites for Learning after-school program.
- Four family events were provided to 79 families.
- 29 students reported an increase in being physically active for at least 30 minutes per day.
- 43 students reported an increase in fruit and vegetable consumption.

- Eight students reported a decrease in BMI.
- 503 Ringgold County residents impacted by programming.

Success Story:

A program offered by SFL called After School Chefs has introduced new fresh fruits and vegetables to students and their families. After School Chefs has students make their own healthy snack and sample new fruits and vegetables. Students recently did a salsa unit where they made and sampled different salsas. Many of the students initially refused to try the new ingredients, but with encouragement sampled the salsas. Students were very surprised that they actually liked red onion, avocado, chick peas, guacamole, and mango. These were all new foods to the group. Students then took the recipes home to share with their families. Families were interested to find that the only local rural grocery store carried these items and are willing to expand what is available based on demand. After School Chefs has gotten students to try new fruits and vegetables and has assisted them in finding ways to prepare these healthy items so they want to eat them.

Shelby County Board of Health

The Shelby County Board of Health partnered with community residents and Myrtue Medical Center and decided to “Dream Big.” Together, they constructed a 40,000 square foot, LEED certified wellness center that includes a gymnasium, lap pool, zero entry depth pool, racquetball court, physical therapy center with aquatic rehabilitation, fitness studio, cardiovascular fitness area, weight room, kid zone, and meeting room. The facility was constructed to promote individual and community health and wellness by increasing physical activity and expanding physical therapy options. Residents of Shelby County and surrounding communities began using the wellness center the summer of 2010.

Outcomes:

- 782 memberships (2000 members) were in place when the new facility opened. Memberships have steadily increased to the current number of 1300 memberships (3750 members). To put this in perspective, the city of Harlan has a population 5200 and Shelby County has a population of just over 11,900.
- Average fitness center usage is 400 visits per day.
- 33 group exercise classes and 9 aquatic classes are offered per week. Average attendance is 18 people per group exercise class and 32 people per aquatic class.
- Two free health education classes have been offered. A nutrition education class was conducted by the Myrtue Medical Center Registered Dietitian and had an attendance of 15. A “Basics of CPR” class was offered by the local chapter of the Red Cross and had 50 attend.

Success Story:

The overwhelming attendance at the new fitness center is creating a culture of wellness in the community. Individuals who have not been physically active before are now exercising routinely.

Participants of a senior-based aerobic class have started meeting on certain days to socialize together over free coffee offered in the fitness center lobby where cafe' tables and chairs are located.

All age groups are using the facility resulting in an increased interaction between youth and adults. The fitness center has a policy that requires children less than 12 years of age to be accompanied by an adult and the adult must stay in the same area as the child.

The culture of wellness has extended into the business community. Some local businesses are helping to pay their employees fitness center memberships and have set guidelines on how many times the employee must use the facility per week or month.

Siouxland Health Department

The work of the project implemented by the Siouxland District Health Department and its partners comprising their coalition was primarily focused on improving the health of the county's residents through worksite wellness programming and related initiatives. The project consisted of one overarching goal – to create a “Climate of Wellness” within Woodbury County, where the places people live, work, learn and play will protect and promote their health and safety.

This project has taken a unique, community-based approach in their worksite wellness initiatives by forming a Worksite Wellness Coordinating Council comprised of interested representatives from organizations in the community. They meet monthly to discuss key elements of effective wellness programs, to provide cross education amongst members, and share resource ideas and strategies. During their project period, they have seen an increased level of involvement by many businesses. They have tracked the following measures to demonstrate success:

- Over 30 businesses have been involved in their planning efforts
- Participating businesses participate in or encourage participation in the Live Healthy Iowa 100 Day Challenge. Six hundred eighty-one employees in participating worksites logged 2,114,650 minutes of accumulated activity and reported total weight loss of 2,765 pounds.
- By reaching the employees in the participating worksites, they are also able to reach spouses and dependents, in many cases. They estimate the total number of individuals reached by the work of their project to be nearly 4,500.
- A 2010 survey of area businesses revealed that 85% are offering a worksite wellness program; up from 66% in 2009.

Success Story:

A successful planning event was also held in May 2010 where interested individuals were invited to attend to discuss worksite wellness efforts in the community and to make a coordinated plan. The event featured a keynote speaker, Jeff Johnson from Johnson Machine Works, who spoke to the value of offering employees wellness programs. A participant in this event was quoted, “I liked seeing what other businesses are doing to get ideas for our business. Jeff Johnson was very encouraging and uplifting. His presentation, and other things said at the meeting helped me to see that wellness isn't always just physical-it is also spiritual and mental.”

Story County Board of Health

The work of the project implemented by the Story County Local Board of Health was an extension of the *Active Schools in Active Communities* project that was previously funded by a Harkin Wellness Grant. Their goal was to disseminate youth activity programs by facilitating multiple, individual partnerships. They planned to accomplish this goal through four objectives:

1. Form local community groups/coalitions
2. Expansion and dissemination of the VERB Summer Scorecard Program
3. Expansion and dissemination of the Iowa Walk to School Program
4. Expansion and dissemination of the Mileage Club Program

The outcomes of this project were very positive. They were able to sustain these programs in Story County and expand them to other counties/communities by providing outreach and support throughout the planning and implementation processes. In addition, they began building relationships with other communities interested in offering the programs to local youth in the future. The counties/communities which implemented one or more of the programs and the counties/communities showing interest to implement in the future are: Boone County, Dallas County, Warren County, Muscatine County, Woodbury County, North Polk Central Elementary School in Polk City, and South Winneshiek School District.

Success Story:

One of the biggest successes of this project was the capacity that was built and partnerships formed that will allow them to sustain their work. They have developed Web sites for each of the three programs which enable community groups to create their own community programs. They have also developed a complete resource binder which contains electronic files and handouts that explain all the steps needed to plan and run these programs. Lastly, they have gathered quotes from participants in their programs and parents that demonstrate that their efforts have been well-received. According to a participant in Boone County, “VERB helped me to stay in shape and work out more.” A parent from Story County said, “My kids really enjoyed the VERB program! It greatly increased their physical activity—they really wanted to fill up those scorecards! The end of the year pool party was awesome! The prizes were exciting and having the pool reserved just for the VERB program in the evening was fun! Thanks for the great program---hope to see you this coming summer!”

Wayne County Board of Health

The Wayne County Board of Health completed several projects to increase physical activity and improve nutrition for Wayne County residents. The community tennis courts were resurfaced and pickle ball markings were added to the courts. A pickle ball manual and age-adjusted tennis and pickle ball rackets are available for check out at the Prairie Trails Aquatic Center. Pickle ball and tennis tournaments have been held. A walkway was constructed from Walden Park to the Prairie Trails Aquatic Center/Tennis Court Complex. Indoor physical activity options were expanded to include new group fitness classes and purchased a recumbent stepper to facilitate non-impact indoor exercise opportunities during cold weather. Nutrition and physical activity classes were provided at the Senior Meal Site.

Outcomes:

- Usage of the tennis courts increased with tennis and pickle ball tournaments.
- Children check out rackets and use the tennis and pickle ball courts at each swim break.
- Zumba and kickboxing classes were two new fitness classes in the winter. Zumba classes reached capacity of 30 participants each year. Kickboxing classes had 15 participants for each year.

Success Story:

A smooth walking surface now invites youth and seniors to walk rather than ride from Walden Park to the aquatic center/tennis court area and child care center. Observation of trail usage revealed that all ages of individuals enjoying the trail including seniors in assisted living, young moms with children in strollers, classes from the child care center, and employees and visitors of Wayne County Hospital.

Wayne County residents are more aware of availability of year round physical activity options. Wayne County Hospital physical therapy staff members attend the wellness center with clients who are transitioning to their after-care plan. Wayne Community Schools and Wayne County Hospital continue to include memberships to Prairie Trails Wellness Center for their employees as part of their wellness benefit. Continued efforts will be made to maintain this benefit and expand to other businesses. The Wellness Center sponsored a walkability assessment of Corydon. All ages of residents attended the event that drew attention to the conditions of sidewalks in the Corydon.

Van Buren County Board of Health

Healthy Villages started in the fall of 2008 with the creation of the Healthy Villages Coalition which consisted of 20 members representing seven communities (villages) who helped develop the program. The pre-program health screenings were completed in January 2009 with over 500 participants attending the screenings and registering for the first Healthy Villages program, “Walk Across Van Buren County.” There were over 550 participants who completed the program. Of those, 350 participated in the first challenge, 270 remained active and started Year Two (77% retention among active program participants). At the beginning of the program, participants established long-term health-related goals. Throughout the program, participants set short term goals which were reviewed and reset every 3-4 months. The short-term goals represented “mile markers” toward their long-term goals. Sixty-two of participants completed the post-program health screening and survey. Eighty-four percent of participants were successful in achieving some of their health related goals and 6 % achieved all their health goals.

Educational classes were held at five different locations with approximately 170 participants in attendance. The Community Leaders Group assisted in creating a list of topics for the classes. By creating a new program every three-to-four months, participants were able to stay motivated and excited about the program. Participants also checked their progress by monitoring their weight, blood pressure, and resetting their goals between each program.

Mini-fitness centers were created in 2009. Centers are located in Cantril, Milton and Birmingham. The staff worked with the communities to establish locations for these centers. Each town developed its center in a unique way. Cantril's center is located in its Township Hall and is operated under the city, which covers the insurance and provides the upkeep of the center. They have also received a community grant to purchase extra equipment. Some equipment has been donated to the center. Milton's center is located in the City Hall and is also tied to the city to cover the insurance and the upkeep. Birmingham's center is located in the local convenience store, Jet Gas, and they have partnered with Jet Gas and the city to cover the insurance and maintains of the center. Participants may use the center at no charge. The community groups will ensure that the centers are maintained after the grant period is completed. All of the fitness centers have a plan in place for cleaning, equipment repair and maintenance of the center. The other villages have worked with their schools for open access before and after school.

A Healthy Villages Web site was created, starting as a blog page and evolving into a full web page. The site offers a calendar of events, weekly health tips and recipes, tracking information, registration and other important components of Healthy Villages.

www.thehealthyvillages.com/

Success Story:

Since the Healthy Villages Program was implemented, life has changed for participants in three ways: 1) three mini-fitness centers have been established in the county for participants to use at no charge. This has allowed participants to continue to exercise through the winter; 2) participants have learned how to set realistic and measureable goals for themselves and have been able to achieve those goals. A number of participants have lost weight, are exercising more and eating better due to the program and the help with setting goals; and 3) participants have learned to change their habits. They are now walking to the meal sites for lunch instead of driving, they are walking in groups on the walking trails and they are eating more fruits and vegetables.

IV. Lessons Learned

While the grant applicant has a vision and dream of what could be, the reality of implementation of the project at the community level may demonstrate that some pieces of the work are not possible. At this juncture the blueprint and plans are changed to follow the more successful pieces of the work and develop those into broader community successes. Neither the grant maker nor the grant applicant will know which of the proposal elements would work at the community level, but a responsive and flexible grant maker will help the applicant learn early what works and adapt the work plan to build on the new opportunities. This optimizes community successes. In some instances the growth and change can be affected within one grant cycle, in some situations more than one grant award is responsible for the full complement of community successes. In the broadest definition of community change, a decade of grant maker, grantee and community work lays the foundation for learning and growth and process improvement as well as measurable change in health indicators of the citizen populations.

Our Iowa CWG model uses community coaches, a broad review process, and a commitment to technical assistance designed to enhance community success. We do extensive evaluation, not only of the individual grant but also of the grant making process itself. As a state health promotion grant maker we do this because we believe that health improvement happens one community at a time.

V. Appendices

- A. IDPH Iowa Healthy Communities: Harkin Wellness Grant Work plan and Results
- B. 2009-10 Community Wellness Grant Project Summaries
- C. 2009-10 Community Wellness Grant 2009-10 Map
- D. Community Wellness Grant Newsletter
- E. IDPH Check-up Newsletter
- F. IDPH Focus Newsletter
- G. Iowa Healthy Communities Publication

